

# CheckUp

this month

**INVEST  
IN  
FUTURES**  
LVHN RAISES  
**\$206,000**  
FOR UNITED WAY!  
(See page 3)

VOL. 11, NO. 12 • DECEMBER 17, 1998

## Network Cites \$32.1 Million Community Contribution at Annual Meeting

OFFICIALS AT LEHIGH VALLEY HEALTH NETWORK (LVHN) ANNOUNCED ITS ANNUAL COMMUNITY CONTRIBUTION AND REVIEWED KEY ACCOMPLISHMENTS DURING 1998 AT ITS ANNUAL MEETING ON DEC. 2.

The network contributed \$32.1 million to the community in fiscal year 1998 (ending June 30, 1998), which includes \$14.7 million in direct patient care; \$11 million in professional and patient education; \$3.5 million for partnerships with local government, schools and community organizations; and \$2.8 million for community education and prevention. The total represents the community service commitment of LVH, MHC and Lehigh Valley Health Services; it does not include in-kind contributions of time and equipment. This was the first year the MHC contributions were included in the total. Compared to last year, LVHN's contribution (excluding MHC) increased by \$6.4 million.

"We know that health care is very personal. It is not a series of buildings and equipment, however impressive they may be and however capable of providing the most up-to-date technical aspects of care. It is the people within those buildings who use that equipment and deliver the 'hands on' care who make the difference," said Kathryn P. Taylor, chair-

### *Celebration of Community*

#### Members of the LVHN board of trustees who will leave the board this year:

JOHN C. CASTALDO, M.D., neurology, and immediate past president of the medical staff, who served for six years

•  
GEORGE W. HARTZELL, M.D., surgery, who served six years

•  
LOREN J. HULBER, president and CEO of NovaCare Employee Services, who served for three years

#### Four trustees were re-elected to an additional three-year term:

William F. Hecht  
Timothy J. McDonald  
Charles D. Snelling  
Kathryn A. Stephanoff

man of the board of Lehigh Valley Health Network.

In reviewing some of the more significant milestones of 1998, Taylor cited LVH's recognition as one of the top hospitals in the country for the third year in a row by *U.S. News and World Report* magazine, on the strength of its cardiac and urology programs. Additional honors included a three-year accreditation with commendation for LVH and Lehigh Valley Home Care and Hospice from the Joint Commission on the Accreditation of Health Care Organizations, a designation reserved for the top 15 percent of hospitals nationwide; and recognition by the Pennsylvania Health Care Cost Containment Council as one of only three heart surgery programs in the state with superior outcomes.

In his annual address to the board, staff, physicians and community leaders, Elliot J. Sussman, M.D., president and chief executive officer, compared the connection between the health network and the community to a kaleidoscope, "with many components that intersect and complement each other, and create a sense of balance and harmony."

man of the board of Lehigh Valley Health Network.

### LVHN Staff Reflect on 1998... and Anticipate 1999



"Opening the Health Center at Trexlertown is an exciting way to start the new year. People can get all their health care needs in one facility — nutrition, exercise

classes, screenings. It's an

innovative way to care for our community, and a venture that our organization should be proud of."

—ELIZABETH BROWN, dietitian, Helwig Diabetes Center



"The first year of the merger brought good news for MHC and the community: a new cancer program is planned and a centralized psych facility will be built here."

—GAYLE KEIM LEVAS, R.N.C., allied therapist, base service unit, MHC

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## TRAUMA/NEURO STAFFS Share Common Ground on New Unit

CAROL FOX WAS CONFIDENT THAT MERGING THE SHOCK-TRAUMA AND CENTRAL NERVOUS SYSTEM UNITS WOULDN'T HURT the quality of care the staffs provide. It was the non-clinical issues and the timing that concerned her.

"Here were two independent, professional staffs coming together instantly. There was little time to prepare for that," said the director of the new trauma/neuro intensive care unit (TNICU).

On Sept. 9, day one of the merger, a pregnant accident victim and her unborn baby died, setting the tone for continuous fast-paced activity, which neither unit had seen for some time. The staff realized they'd have little time for anything but patient care. The census in shock-trauma recently hovered around 65 percent, while CNS' was

higher at 80. In the first month, TNICU's average census was 94 percent.

"The bedside care was top-notch. But, we hadn't had enough time to sit down and discuss some important issues before the merger, and now it didn't look like there would be time either," recalls Linda Reinhart, a trauma nurse.

Each unit had its own professional practice model, and they had to be combined. Both staffs were creating a new identity and would have to merge their education, peer review and other committees. There, too, were minute details and procedures that had to be discussed and resolved, like how to schedule staffing for the holidays. All while trying to save the lives of some of the sickest patients in the hospital.



Discussing the care of one of their patients are trauma/neuro ICU nurses, (left to right) Cathy Fuhrman, Ann Fetcho, Linda Reinhart and Carol Fox, the unit's director.

**LEHIGH VALLEY**  
HOSPITAL AND  
HEALTH NETWORK

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# BENEFITS UPDATE

## New PTO/Sick, Disability Plan Announced

The design of a new, network-wide Paid Time Off/Sick and Short- and Long-Term Disability plan completes the integration of LVHHN benefits. As of Jan. 1, 1999, one benefits plan will apply to all LVHHN employees. Letters explaining it in detail were sent to all employees earlier this month.

Consolidated health, pension and life insurance programs—along with other benefits, practices and policies—were effective July 1, 1998. While integrating the PTO, sick and disability plans, the network followed the same guiding principles used during the integration of the earlier components: fairness to all staff, fiscal responsibility and competitive with the marketplace, yet within benchmark standards.

If you didn't receive a letter explaining the plan, or if you have a question about the information, *please contact your benefits counselor, Gerriane Keiser (317-4739) or Janet Miller (317-4730).* ■

## ANNUAL MEETING

*Continued from page 1*

"Our actions — and our interactions — alter the image, direct the energy, focus the effort," he said.

He cited as examples the collaboration of Valley Preferred and the ALERT Partnership to combat substance abuse in the work place; the involvement of the community in the work of the Coalition for a Smoke-Free Valley; and LVHN's sponsorship with law enforcement agencies and ALERT of a series of educational symposia on community approaches to violence prevention.

Partnerships with physicians and other hospitals are helping to enhance the level and scope of health care services available to area residents, Sussman said. Most notable is the merger of LVH and MHC, which marked its one-year anniversary last month.

He also pointed to the network's new partnership with The Children's Hospital of Philadelphia to build an outpatient specialty care center for children at Muhlenberg and an advanced pediatric intensive care unit at LVH's Cedar Crest location. Continued collaboration among the 11 hospitals and 3,000 physicians in the PennCARE network ensure that "...knowledge and experience and expertise are shared ...to discover the best practices for making people well and keeping people healthy," he said.

Sussman also took the occasion to recognize the hospital's 100th anniversary and to launch a year-long "Celebration of Community," a cooperative effort of LVH and several community organizations to mark the long history of service and volunteerism that has been characteristic of Lehigh Valley businesses, agencies and residents over the past century.

Also during the meeting, Robert Murphy, M.D., outgoing president of the medical staff, recognized the achievements of physicians "...who give of themselves freely to our staff, our community and our profession." ■

*by Constance Walker*

## LVHHN Staff 1998-1999

*Continued from page 1*



"The growth of the Multiple Sclerosis Center has been one of the most positive events. Last year, we've achieved our three main goals — new services such as our exercise program with Allentown Sports Medicine, participation in international research trials and a variety of educational workshops. We've made a difference in improving the quality of life for hundreds of MS patients."

— **NANCY ECKERT, R.N.**, neuroscience research specialist

"Cost-reduction pressures throughout the network dominated much of 1998, as they will next year. The challenge continues to be to balance staffing and clinical needs, and it's not getting easier."

— **DAN DEBLASS**, room coordinator, electrophysiology lab, CC



"What I remember most about this year is the Star Celebration ceremony. It was such a great event. I thought, 'Wow, we are all going to be a part of this — an organization that really cares about people.'"

— **LINDA HUMMEL**, Kolb Center, receptionist, MHC

## Trauma/Neuro Staff

*Continued from page 1*

The change was not unlike a death itself, explained Anne Fetcho, a nurse from the former CNS unit. "We were going through the stages of grieving. We were in denial and shock. Our patients don't even look alike. Trauma victims are usually bloody. You can hardly tell by looking at neuro patients that anything's wrong."

Fox saw that tackling the issues would require support and guidance from the administration and the unit's medical directors, and asked for volunteers to lead the charge. Reinhart, Fetcho and Cathy Fuhrman, another neuro nurse, stepped forward.

What followed was a series of open discussions of issues and solutions with Chief Operating Officer Lou Liebhaber, Mary Kinneman, senior vice president of patient care services, Robert Laskowski, M.D., chief medical officer, and TNICU's medical directors George Chovanes, M.D., and Mike Pasquale, M.D. Jody Wannemacher of organizational development facilitated several sessions.

"There has been a lot of support from the administration and the medical directors," Fox noted. "Staff has even come in on their days off to participate."

The first issue for both staffs was to increase waiting room space for their patients' families, according to Fox. "There isn't enough room in the family waiting room anymore. People are spilling out into the hall."

This led to creating a second family waiting room and redesigning meeting space for physicians and staff. Staff was given the OK to proceed with these plans and the changes should be completed early next year. Meanwhile, new, multi-colored privacy curtains were hung in each patient treatment area, replacing the yellowed ones that must have been at least 10 years old.

Cross-training staff in the clinical skills they need to care for any patient on the unit has been physician led, resulting in collaboration and confidence-building. "Dr. Chovanes even changed his soccer coaching schedule to participate," Fox said. "Physician support has improved dramatically."

Chovanes acknowledges that the staff is challenged by the differences among them, but notes that their areas of "common ground" and enthusiasm are assets for picking up new skills. "They've each taken care of the other type of patient, and they're energetic and interested in learning," he said.

"The physicians are going through as much change as us, and like us, they're growing," noted Fuhrman. During a recent "code red," she worked alongside trauma doctors and staff as they gave the patient 40 liters of blood. "They were really supportive. The professionalism is unbelievable."

She realizes her days caring for patients in the "cozy," familiar CNS unit are over, recalling that the close-knit neuro staff even shared Thanksgiving dinner if they were working. "This is a big adjust-

ment," Fuhrman said. But not the last change for them, they recently learned. TNICU's merger days aren't over. The unit will move to the East Building in 2000, where it will join with the medical and surgical intensive care units.

That gives the new co-workers about a year to adjust to each other, a process showing promise each day. "I'm optimistic. Despite some growing pains, the group's working together well," Pasquale noted.

"Overall, morale has improved. Staff members are taking breaks together, sharing duties and learning each other's life-saving skills," Fox added.

Still, sometimes the most skilled staff can't pull a patient through. Death descended with a vengeance on TNICU the Tuesday evening before Thanksgiving: a young girl and two older men died of their injuries within only hours of each other. The staff, who had tried in vain to save their patients, then cried with and comforted the families and friends of the deceased, who filled the nearby waiting room to overcapacity.

Much later, the care givers on duty munched pizza together, provided by Fox, and some who were scheduled to work on Thanksgiving eve planned the first holiday meal they'd share.

"Change is tough," observed Reinhart, "but we're doing a good job working together because we love what we do." ■

*by Rob Stevens*



## MORGAN CANCER CENTER TO PARTICIPATE IN NEXT STAR BREAST CANCER TRIAL

THE JOHN AND DOROTHY MORGAN CANCER CENTER HAS BEEN CHOSEN AS ONE OF 193 NUCLEUS SITES NATIONWIDE in the second major breast cancer prevention trial. Recruitment for the Study of Tamoxifen and Raloxifene (STAR) is expected to begin early next year.

Participating with Lehigh Valley Hospital's Morgan Cancer Center as satellite sites are Abington Memorial Hospital, Gnadon Huetten Memorial Hospital, Hazleton General Hospital, Hazleton-St. Joseph Medical Center and Muhlenberg Hospital Center, all members of PennCARE.

Conducted by the National Surgical Adjuvant Breast and Bowel Project (NSABP) and sponsored by the National Cancer Institute, STAR follows closely on the heels of the first breast cancer prevention trial, in which the Morgan Cancer Center also participated. That study reported a 49 percent decrease in the incidence of breast cancer in women at increased risk for the disease who took tamoxifen therapy.

STAR will examine whether raloxifene, a drug similar to tamoxifen, is effective also in preventing breast cancer in women who have not had the disease and whether it offers any benefits over those obtained with tamoxifen. Up to 22,000 postmenopausal women 35 or older who are at increased risk for developing breast cancer will be enrolled in this double-blind, randomized clinical trial. The therapies will be administered for five years with followup examinations continuing at least two additional years.

For a fact sheet and to be put on a mailing list to receive trial-related information as it becomes available, please call (610) 402-CARE. ■

by Constance Walker

## LVH/MHC Top List in Survey

LEHIGH VALLEY HOSPITAL AND HEALTH NETWORK, INCLUDING MUHLENBERG HOSPITAL CENTER, ENJOYS A PROMINENT and positive image as the leading health care provider in the area, a recent research study shows.

The study of 385 residents and 100 community leaders in Lehigh and Northampton counties was undertaken to determine the community's image of LVH and MHC and of other hospitals in the area, how those opinions are formed and how they can be influenced. The telephone survey was conducted in August and September.

"More people say our hospitals match their image of the ideal than any other hospital," said Mary Alice Czerwonka, vice president, public affairs. "They are also more likely to choose our hospitals in non-emergency situations." Topping the list of reasons for that choice are location, past experience, doctor's recommendation, reputation and quality of medical care.

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# New Device Monitors Unexplained Fainting

LVH ELECTROPHYSIOLOGIST STEVEN ZELENKOFKSKE, D.O., HAS PERFORMED THE AREA'S first implant of the world's first cardiac monitor to be inserted under the skin. The new Reveal Insertable Loop Recorder offers hope to patients and physicians who have been frustrated by expensive and inconclusive testing for unexplained fainting spells. About 200 of these devices have been implanted to date in the United States.

Zelenkofske performed the 30-minute procedure on a 91-year-old woman who has suffered infrequent episodes of fainting for the past five years. "Because the patient has experienced fainting only once or twice a year, it's been difficult to determine the cause of the episodes," he said. "Using the Reveal heart monitor/ recorder, we have a good chance of catching the cause while it is happening."

Fainting, or syncope, is a widespread medical problem, accounting for 1.5 million physician visits and more than 160,000 hospitalizations annually. It can result in bodily injury from falls or other accidents. Zelenkofske's patient sustained head and back injuries in a recent fall during a fainting spell.

In addition to these physical threats, people who experience syncope may have a serious underlying heart condition, increasing the risk of medical complications or even death if the condition is left undiagnosed, Zelenkofske said. It is estimated that as many as one million people are evaluated and treated for syncope each year in the United States, at a cost of more than \$1 billion to the health care system.



(above)  
Reveal Insertable  
Loop Recorder  
  
(left)  
Hand-held  
Recorder-  
Activator

An electrocardiogram (ECG) recorded during a fainting spell is widely considered the "gold standard" for diagnosing cardiac-related syncope. Patients must often wear bulky, uncomfortable external ambulatory monitors, wires and electrodes for one day or several months to record an ECG during symptoms. For patients whose symptoms occur infrequently, the monitoring period may not be long enough to capture a diagnostic ECG.

The Reveal insertable recorder, which is about two-and-one-half inches long, less than three-quarters of an inch wide and a quarter of an inch thick, is placed just under the skin of the chest area. It is designed to improve capture of an ECG during a symptom by extending the monitoring period to more than one year.

The recorder continuously monitors the heart's electrical activity and records it in a "loop," replacing previous ECG information with new ECG information. When symptoms occur, the patient uses a small, hand-held activator to capture the recorded ECG. This preserves the ECG recorded during symptoms for subsequent study by the electrophysiologist.

Developed by Medtronic, Inc., of Minneapolis, the Reveal Insertable Loop Recorder received market approval by the U.S. Food and Drug Administration in January, 1998. ■

by Rob Stevens

## United Way Drive Reaches New Heights

JOE GALLO HAS NEVER TRAVELED OUTSIDE THE U.S.; IN FACT, HE RARELY vacations anywhere but on the East Coast. But that's likely to change in 1999... big time.

The mental health tech on the adolescent unit at 17th is this year's Grand Prize winner of the United Way Campaign at LVHHCN, and that means he's scored \$2,000 to go... anywhere. More than 250 other LVHHCN contributors also won prizes, ranging from \$150 gift certificates to the Glasbern Inn and Highland Farm Bed and Breakfast, to a free cup of cappuccino from Espresso Express. All gifts were donated to the network for the United Way drive.

Gallo won the grand prize, but the real winners from this year's United Way campaign are the hundreds of thousands of individuals around the Lehigh Valley who benefit each year from the United Way.

**Thank You  
for being  
part of the  
solution!**



This year's local campaign raised more than \$10.5 million.

LVHHCN's 1998 United Way drive was the best ever. As of Dec. 3, LVHHCN's total pledges or contributions exceeded \$206,000, more than \$50,000 more than its 1997 drive. This was the third highest "new dollars" achievement in the valley, earning the network a Community Caring Award. In addition, total network participation rose from 19% last year to 24%, and leadership gifts of \$500 or more reached 57, over 48 in 1997.

Right now, Gallo says his plans are "up in the air." That could mean he'll fly off to Italy, the land of his ancestors, but he also might stay stateside. "I'll have more time to think about it after the holidays," he said. "It's just too busy right now."

When you have a minute, Joe, find the nearest passport office. ■

by Rob Stevens





Lou Liebhaber, COO

*Lou Liebhaber*

# Issues & Initiatives

Issues & Initiatives is a series of activities providing employees with information about current health care issues at Lehigh Valley Hospital and Health Network.

We are pleased to include a new feature, "Letters to Lou." If you have an issue, question or comment for Lou Liebhaber, chief operating officer, send your letter to him, and it might appear in a future issue of CheckUp, space permitting, along with Lou's response. Letters must be relevant, constructive and signed by their author. We reserve the right to alter letters for purposes of clarity or space.

—THE EDITOR

## You Can't Drive *FORWARD* by Looking in the *REAR-VIEW* Mirror

WHERE SHOULD LVHHN FOCUS ITS EFFORTS IN THE NEXT TWO TO FIVE YEARS TO MAINTAIN OUR LEADERSHIP position as a successful, high-quality and innovative organization?

Recently, nearly 150 managers from the hospital and Health Services divisions gathered over several days to identify, discuss and draft plans to address trends in health care on local, regional and national levels.

While the discussion and plans are still works-in-progress, I think it's important to share with you the three themes that emerged during this retreat:

### Physician Partnerships Critical to Our Future

When a physician asks, "What organization do I want to align myself with for the future," we want him or her to choose LVHHN. The more our medical staff colleagues see us as supportive, friendly and valuable to their practice, the greater their commitment will be to our network. This is undeniably one of our priorities for our future.

The changes we are experiencing in health care are much more dramatic for our physician colleagues. Managed care, competition and cost pressures are forcing them to work harder and more creatively to deliver quality patient care and maintain their accustomed degree of economic return on their efforts.

Many doctors who sold their practices to national for-profit companies in hopes of better office management systems, less competition and increased rewards are reeling with disappointment. The promises of wealth and well-being have fallen far short of their expectations.

We need to keep in mind that everything we do impacts our medical staff partners, including the design and effectiveness of our information systems, how we deliver patient care, the ease with which they

access our services and our patient satisfaction.

When they succeed, our patients benefit as do we.

Without the leadership and partnership of our physicians, LVHHN would have no purpose. Their success directly correlates to our own success, outcomes and economic stability.

### Here's How

When a physician wants to order several diagnostic studies for an office patient, does his/her staff have to place several calls to testing areas to set them up? Does the caller get put "on hold" during each call? Do they have trouble getting time slots that are convenient for the patient and experience other difficulties? Think about how this frustration can multiply as the physician's office arranges tests for several hundred patients each week. Would this be a positive experience that provides easy access to our services? Hardly.

But if the physician office were linked electronically to centralized computerized scheduling, the tests could be arranged at once, saving time and money, and avoiding inconvenience for both the patient and the physician's staff. A pleasant experience for our physicians means a better one also for their patients. Good customer services results in better all-around outcomes.

And, there are scores of opportunities we can take to improve the satisfaction of our most important customers, which, in turn, increases our value to them.

### Providing Care Across the Continuum

Another major competitive advantage for LVHHN lies in our ability to effectively deliver our health services seamlessly across the continuum to our patients regardless of their location.

Our network has all the inpatient and outpatient services needed to keep our community healthy: three hospital locations, ambulatory programs—

which will include the Health Center at Trexlertown early next year and parts of the East Building as early as next summer—as well as Lehigh Valley Home Care and Hospice, and physician office practices.

As health care is redesigned, partly in response to reimbursement and managed care pressures, the dominance of inpatient care is decreasing and more services are being provided in settings outside the traditional hospital. This challenges us to question convention, so we can better meet our patients' and physicians' requirements.

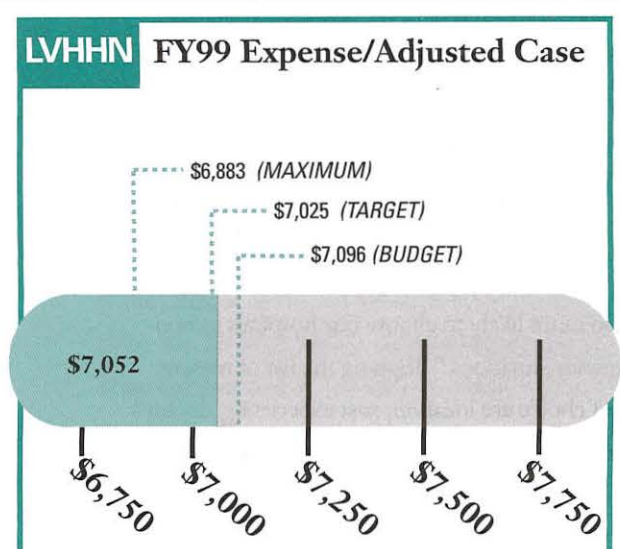
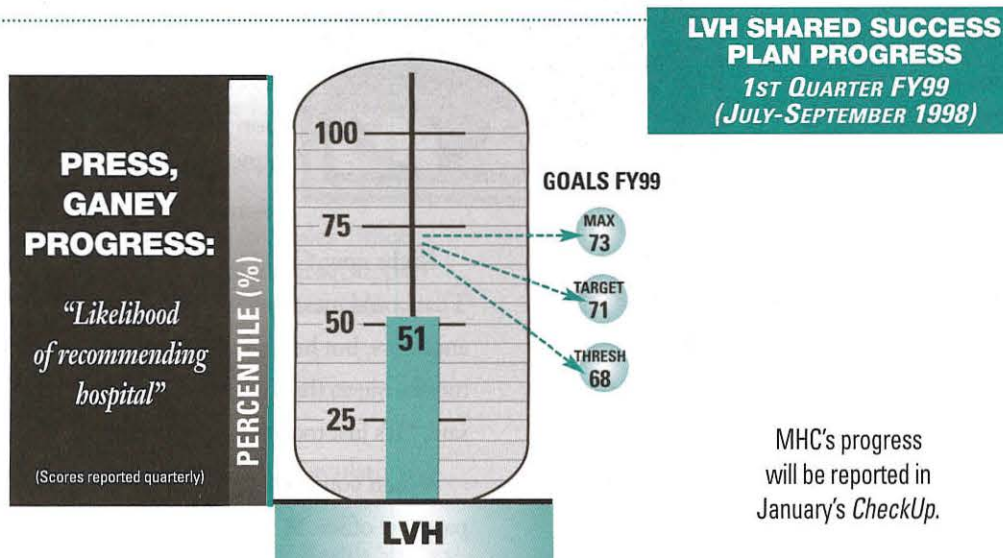
That's why we're redesigning the 17th & Chew site as a hub for primary care, consolidating tertiary inpatient services at Cedar Crest and specialized outpatient services at MHC, seeking new opportunities to our west and north, and expanding our ambulatory programs. We're acting now, so we one day won't have to look back and regret having maintained the status quo.

### Tracking Our Progress

We've set some pretty demanding goals to secure our network's future, several of which I've discussed in this column. But we can't wait until the end of the year to see if we've reached them, so we need to routinely ask, "How are we doing?" and "What should we change?"

Our information systems are critical to help us monitor our activities and find areas for improvement. Whether we're examining patient satisfaction, quality of care or our costs, our reliance on information can't be underestimated. It's the feedback that supports our commitment to continuous improvement.

We have the necessary resources, expertise and staff to reach our goals. It's the role of our managers to support the people who deliver care each day, so we continue to be the organization of choice for patients and providers. ■





# Service Star a Heroine in Fire Rescue

CONFINED TO HIS WHEELCHAIR, RICHARD WIRTH USED ALL HIS STRENGTH AS HE RIPPED DOWN THE burning curtain ignited by a candle. He grabbed the closest thing — a pillow — and pounded it onto the fire. But the flames were rapidly spreading to the couch, onto the rug, throughout the family room.

Home alone, Wirth had to get out of the house fast. He grasped the wheels of his chair and started to vigorously push and push and push. There was no time to reach for the phone, lying on the floor.

"I was just about to the door, I felt like all I had to do was reach for it and the house went completely black with smoke," Wirth said. "Then I passed out."

There he sat in the burning home, unconscious, breathing soot and chemicals into his lungs, the immense heat slowly burning his skin. His wife, Marge, wouldn't be home from work for another hour.

Then came Debbie Haaf, his Home Care physical therapist and November's Service Star. Earlier that day, she had rescheduled their appointment — a blessing in disguise.

Noticing smoke billowing out of the roof and windows, she opened the door and yelled for Wirth. Barely conscious, he responded. "All the smoke was pouring out, and I couldn't see," Haaf said. "I just thought 'How am I going to get in there?' I just knew I had to tell somebody I was going in — in case we couldn't make it out."

Remembering what she read in the hospital's safety manual, Haaf closed the door, so the oxygen wouldn't cause the house to burst into flames. As she sprinted across the street toward a neighbor's home, she called 911 with her cell phone. "I just kept thinking, 'Oh my God, I wish I could run faster,'" she said.



November's Service Star, Home Care physical therapist Debbie Haaf

She banged on the door. No answer. She dashed down the road and finally got a hold of neighbor Rome Ragnelli. Running back to the burning home, the pair flagged down a pickup truck. The driver, Scott Alderfer, joined in on the save.

The two men inched through the smoke, relying on touch and sound, their eyes closed tightly. Alderfer heard Wirth breathing, then felt his foot. He grabbed the steel of the chair and pulled it toward him. Ragnelli helped get Wirth outside and on the ground.

"His face was black from soot and all I could think was, 'His lungs are coated with that too,'" Haaf

said. "I checked his vital signs and kept him on his side in case he were to vomit."

Ambulances and firefighters arrived soon after. Suffering severe smoke inhalation and second and third degree burns on his head, face and feet, Wirth was transported to LVH. Just weeks earlier, Wirth, who has multiple sclerosis, was hospitalized with pneumonia. "I had a hard time sleeping that night," Haaf said. "I just prayed that he would survive."

It was more than prayers that saved Wirth's life. "If it weren't for Debbie, they would have found a skeleton in a wheelchair, and the house would have burned down," Wirth said. "She saved my life. That's the bottom line."

Today, Wirth is recovering in Liberty Nursing and Rehabilitation Center in Allentown. He looks forward to the day when he can move back into his house, which is under reconstruction, and continue with his rehabilitation at home.

"Even before this fire, Debbie deserved an award," Wirth said. "She is an outstanding physical therapist. Early last summer, she had me walking. It was only eight or 10 feet, but to me, it was fantastic. Nobody had been able to get me there before. I actually requested her the day of the fire."

And with Haaf's help, Wirth hopes to take those steps again someday. ■

by Pamela Maurer

## ABOUT OUR PEOPLE



**Fred Pane, LVHHN** pharmacy director, is listed on the first honor roll of "Outstanding Health System Pharmacists" published in November's Hospital Pharmacist Report. The honor roll was compiled from responses

to a ballot published in the journal. Pharmacists were asked to nominate pharmacist colleagues at the staff and management level who, in their opinion, performed in an extraordinary manner on the job.

Abstracts submitted by LVH perfusionists **David Palanzo, C.C.P.**, and **Debra Zarro, C.C.P.**, were accepted for presentation at the 1999 meeting of The American Academy of Cardiovascular Perfusion, Jan. 23, in San Antonio, Texas.

Palanzo's manuscript is titled, "Effect of Trillium Biopassive Surface Coating of the Oxygenator on Platelet Count Drop During Cardiopulmonary Bypass." Zarro's will present a poster on "Common Factors to Indicate if a Patient will Require Large Amounts of Heparin During Cardiopulmonary Bypass."

**Patrick C. Simonson, C.H.E.**, director of ambulatory care, was recently named to the Research and Development Committee of the American College of Healthcare Executives (ACHE). Earlier this year, Simonson was awarded ACHE's Early-Career Healthcare Executive Regent's Award. The award recognizes excellence in health care management. ■

## LVH / MHC TOP IN SURVEY

Continued from page 3

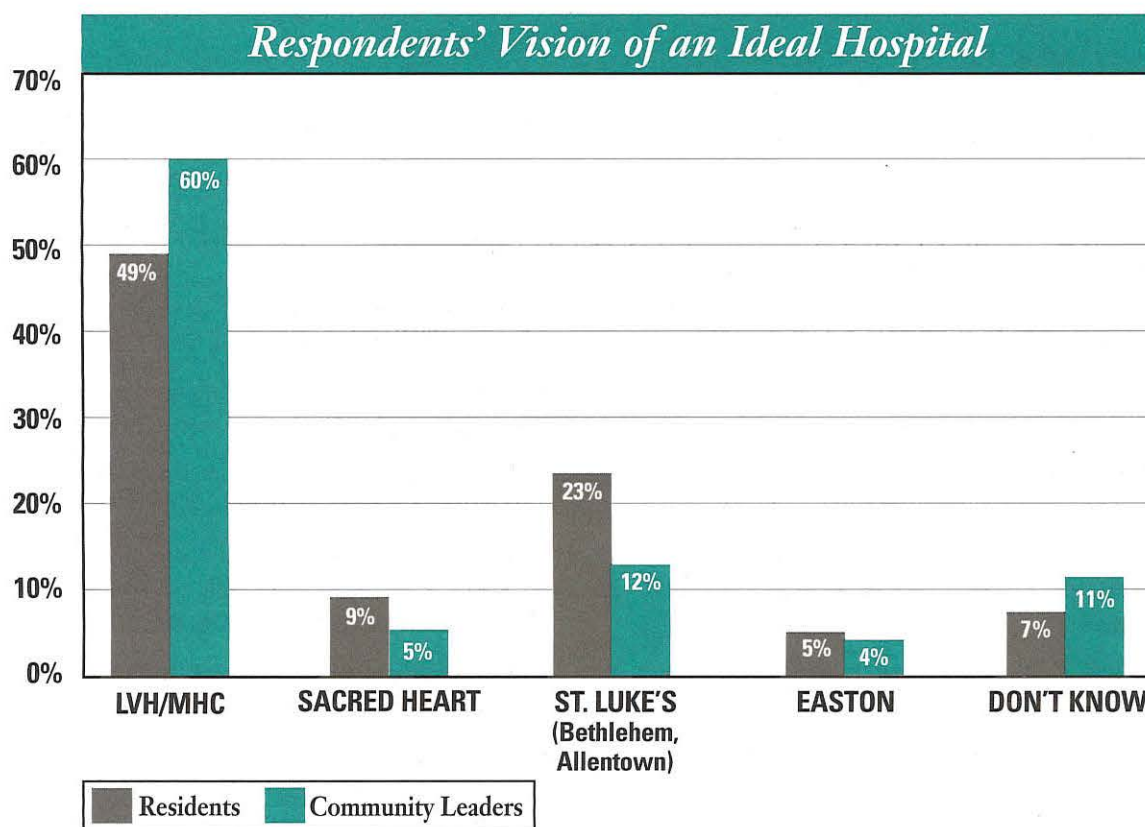
Asked another way, respondents stated that the most important factors when selecting a hospital are the quality of the doctors, reputation for excellent medical care and the quality of the medical care. Based on their own personal experience or LVHHN's reputation, a large percentage of respondents rated the quality of the doctors and the medical care as "excellent" or "very good."

"One of the more important things we learned from this study is the value of relationships with our

physicians and our patients," Czerwinka said. "If their physician highly recommends us, or if they or their family members have received care here, people are more likely to choose us and to rate us as ideal."

At the same time, LVH received fewer "very satisfied" ratings from respondents regarding the care and compassion shown them than some of the other hospitals in the area, she said. "We have a great opportunity to make sure patients and the public have a positive experience with us," she said. "Our PRIDE initiative is right on track."

Copies of the study are available in public affairs. ■





# SHE'S A LAWYER, A NURSE, A PROFESSOR ...and AN AUTHOR

JANINE FIESTA PROBABLY APPEARED TO BE A TYPICAL SHOPPER IN BARNES & NOBLE THAT DAY, PERUSING THE BOOKS with her daughter, Melissa. But little did the other avid readers know that among them was an author, her books showcased in that very store.

In fact, it didn't even occur to Fiesta herself, until she stopped by the nursing literature section. "I was looking at the big reference books and suddenly I realized that I had written all the legal chapters in them," she said. "And on the next shelf were my books. I just never thought of it in terms of a whole shelf. It was such a neat experience."

You see, Fiesta has a niche.

Vice president of legal affairs and risk management, she is one of the first nurse-attorneys in the nation and among a few actually working in the medical setting. More than 15 years ago, she pioneered legal books for nurses and to date, has authored three — "The Law & Liability: A Guide for Nurses," "Twenty Legal Pitfalls for Nurses to Avoid" and "Legal Implications in Long-Term Care."

Fiesta also writes a monthly column for *Nursing Management*, gives seminars across the country, is co-founder of the American Society of Health Care Risk Management and recently taught a health law class for Allentown College's MBA program.

"Back when I became a lawyer, there wasn't a lot of legal information available for nurses," Fiesta said. "Just like doctors, nurses are sued for malpractice. They have the potential for confronting a legal issue every time they come in contact with a patient."

For example, nurses could face a lawsuit if a patient falls out of bed and is injured, or if a patient's condition worsens from failure to notify the physician of significant changes.



*Nurse/lawyer Janine Fiesta pages through her first book, published in 1983. She has authored three legal books for nurses.*

Fiesta's latest book, "Legal Implications in Long-Term Care," published last year, addresses even broader issues. "The standards of care are different than in a hospital," Fiesta said. "Nurses who used to work in acute-care hospitals, now working in nursing homes, were calling me from all over the country with legal questions. I just had to write another book."

Fiesta has faced many of the nursing issues firsthand, spending five years as a medical-surgical nurse in Pittsburgh. "I grew up in a family of health care providers; all three of my aunts were nurses and my uncle was a physician," she said. "I would listen to all these stories about what was going on in the hospital, and it just intrigued me. Originally, I wanted to be a physician, but my uncle discouraged me. It wasn't what women did."

Fiesta then got interested in law through teaching. She had been an instructor in a nursing school, and as the youngest faculty member, was assigned to teach a course in nursing law. She liked the subject so much, she enrolled in law school.

"My uncle was surprised," she said. "I don't think he expected it to happen."

That same dedication is what has driven Fiesta throughout her 20-year career in legal affairs at Lehigh Valley Hospital. And of course, between working long hours and raising a daughter, Fiesta always made the time to write. "I would do it on the weekends or when my daughter would go to bed," she said. "But then to actually finish a book I would take two week's vacation and just write non-stop. I find it to be a great outlet."

So what's next on her book-writing agenda?

"I'm definitely switching to fiction," she said. "My daughter and I are thinking about writing something together after I retire. I've already got a great plot and great characters, based on my experiences in law and health care, of course. So, I probably won't use my real name."

We'll just call her Janine Grisham-Crichton. ■

*by Pamela Maurer*



## LVH Cafeterias to Implement Bar Code for Physicians

Starting Jan.15, the cafeterias at CC&I-78 and at 17<sup>th</sup> & Chew will implement a bar coding system for physicians purchasing meals. Instead of charging meals with their personal numbers, physicians will have to show their ID badges at the register. "This will help with security issues and also make the billing process more efficient," said Paul Fite, manager of food services.

## Pool Trust Approves \$7 Million in Grants

The Dorothy Rider Pool Health Care Trust recently awarded 18 grants with a combined total of nearly \$7 million to support LVH and its community partners in improving health in the Lehigh Valley.

The grants include:

- Community Services for Children, Inc./LVH Department of Community Health and Health Studies-Early Head Start Family Place, Training Institute and Program Evaluation
- Parents of Down's Syndrome-Eastern Pennsylvania Down's Syndrome Center
- Jenn's House
- AIDS Outreach/LVH AIDS Activities Office Voucher System for Nonreimbursable Support Services and Tracking Patient Services and Outcomes
- AIDSNET-Improving Housing for People with HIV/AIDS
- LVHHN Planning Grant for the Circulatory Center
- LVH Department of Community Health Studies-ALERT Partnership
- LVHHN Physician Leadership Development Program
- LVH Department of Medicine-Chief, General Internal Medicine Discretionary Fund
- LVHHN Geriatrics Program Support
- Allentown Public Library-Pool Trust Good Health Library
- LVH Center for Educational Development and Support-Nursing and General Staff Education
- LVH George M. Moerkirk Emergency Medicine Institute-METI Human Medical Patient Simulator
- LVH Department of Pediatrics-Early Intervention for Young Children at-Risk for ADHD
- LVHHN Center for Health Promotion and Disease Prevention-Lowering of Vascular Atherosclerotic Risk (LOVAR) Study
- LVHHN-External Consultation and Review for LVH Endowed Chairs
- LVHHN Department of Community Health and Health Studies-Healthcare Forum "Creating Healthier Communities Fellowship 1999-2000"
- LVHHN Department of Community Health and Health Studies and the United Way- "Healthy Communities Initiative: Institute for the Development of Healthy Community"

"Lehigh Valley Hospital and Health Network and our community are blessed with the generosity of the Pool Trust in helping to further Mr. Pool's vision for healthier communities," said Elliot J. Sussman, M.D., LVHHN's president and CEO.

The Dorothy Rider Pool Health Care Trust was founded in 1976 by the estate of Leonard Parker Pool and named for his wife Dorothy Rider Pool. The Trust serves as a resource to enable LVH to be a superior regional hospital and to improve the health of the citizens of the Lehigh Valley. As of summer 1998, the Trust's assets exceeded \$100 million. The Trust has awarded \$12 million in grants in calendar year 1998. ■

*by Rob Stevens*



# SHARING HOLIDAY SPIRIT ALL YEAR LONG

FOR MANY PEOPLE, IT'S NO TREAT TAKING DOWN THE CHRISTMAS TREE EVERY JANUARY. SO, DON'T DO IT.

Have some fun instead and just redecorate it, say Colleen Yons and June Schlicher of the cashier's office at 17th & Chew. If you peeked through the window of the cashier's office last month, you might have noticed the bale of hay, the pumpkin lights and the scarecrow garland that decorate their "theme tree."

"It started last December when we redecorated our 'Christmas tree' with a winter theme. There were so many compliments that it just took off," Schlicher said. "Soon the winter scene became Valentine's Day, then St. Patrick's."

The ladies also created themes for Easter, spring, summer, autumn, Halloween and Thanksgiving... and of course, Christmas. "These trees grow in the forest all year long, so why should we only use them once a year?" Schlicher said.

It doesn't stop with the tree—the ladies also do window scenes, wreaths and ceramic pieces for all



Cashiers June Schlicher (L) and Colleen Yons show off their "theme tree."

holidays. "June and I enjoy decorating," Yons said. "As soon as I was transferred over here from the business office, I knew that I had found someone who loves decorating as much as I do." Anyone who has seen their work knows these two ladies could take on Martha Stewart any day. They make most of

the decorations themselves, sometimes with a little help from their families. Yons' husband transports the props, and Schlicher's son paints the window scenes.

But they take most pride in their tree, spending their free time and money to do this. "We spend at least 40 hours in this office, and decorating adds a personal touch," Yons said.

It puts a spark in the day of others, too. "During the spring, a volunteer came in and just stared at our tree for a while. She had recently lost her mother and said the tree lifted her spirits," Yons said. "Our 'theme tree' has the same effect as a Christmas tree except it lasts all year round."

The ladies have inspired a lot of people to start their own "theme trees." Patients and staff often wander into the office to offer praise and suggestions, anticipating what the ladies will come up with next.

"We have no plans on stopping our theme tree anytime soon," Yons said. "We just love doing it and all the compliments makes it worthwhile." ■

by Laetitia McKivor, public affairs intern



(L-R) Veteran volunteers Lewis, Clare and Russell Laub share a laugh.

FOR THOSE WHO HAVE HAD THE PLEASURE OF WORKING WITH THEM, RUSSELL AND LEWIS LAUB WERE AS MUCH A PART of LVH as the doctors and nurses. For several years they had been an inspiration and delight at 17th & Chew.

Russell Laub, or "Bud" as he is fondly known, had been volunteering at the hospital since his retirement from Bethlehem Steel more than 15 years ago. In 1992, when Lewis helped Bud on a project, the brothers became a volunteer team. Bud's wife Clare, who retired from LVH as a receptionist in the admitting office, and Lewis' wife Lucy, also volunteered at the hospital.

## Brothers Retire After Years of Volunteering at 17th & Chew

Together, the family dedicated a total of 38 years.

"After retiring from our jobs, volunteering gave us a reason to get up in the morning, a sense of purpose," Bud said. "We got to meet some really neat people. And of course, we were doing an important service for the community we have lived in all our lives."

The hospital bade farewell to the fellows and their wives last month when they moved to a retirement community in Elizabethtown, Pa. "This is just as hard as the first time we retired," Lewis said before the move. "We're going to miss the hospital and the friends we have made here over the years."

The brothers handled 80 percent of the hospital's bulk mailings, which amounted to about a half-million pieces a year. They also ordered and organized forms for many departments. And each week Bud got out from the stacks of papers to wind the grandfather clock that adorns the hospital's lobby at 17th & Chew, to keep it ticking as it has for the last 83 years.

The Laubs are a testament to the unique character it takes to be a volunteer. Their dedication had been unwavering and their ability to give was touching. Maybe they didn't get the immediate satisfaction as those who work directly with patients, but they found their work just as gratifying.

Among the praise and recognition from their colleagues, WAEB recognized the brothers for their service to the hospital as part of the station's "Someone Special Volunteer Program Honor of the Day." If possible, they plan to continue volunteering in their new community.

"I don't know what I'm going to do without my guys," said Linda Hoskins, volunteer coordinator at 17th & Chew. "They were here with a smile and their charm whenever I needed them." ■

by Laetitia McKivor, public affairs intern

## SENIOR QUARTERS' GRAND OPENING

More than 200 people attended the grand opening and ribbon-cutting ceremony on Nov. 11 for Senior Quarters at Muhlenberg Hospital Center.

The assisted living facility is a joint venture between MHC, LVHHN and Atria Senior Quarters. It features first-class accommodations and services for its residents that support an independent lifestyle and enhance their quality of life.

Opening ceremony duties were shared by (left to right): Ron Macaulay, senior vice president of business development, LVHHN; Evan Kaplan, executive vice president, Atria Senior Quarters; Daniel Frost, Senior Quarters' executive director; Anna Clawson, personal care assistant; John Feight, the facility's first resident; Elliot Sussman, M.D., LVHHN president and CEO; and Stephen Salvesen, board of supervisors, Hanover Township.





# Have a Question for HR?

By now you should know that human resources' benefits, payroll and most general functions moved to the second floor of the 1770 Bathgate building on MHC's campus. What you might not know is that the employee ombudsman, an HR consultant and a health office remain in Suite 408 of the Morgan Cancer Center at Cedar Crest, and there's also a health office at MHC on the second floor of the Kolb Center.

The main phone line in the new HR office has been receiving 175 calls per day, although individuals can be phoned directly in their office. So please call the person or function you need directly, referring to the following list of phone numbers.

*Note: If someone's number isn't listed, you will find it on the directory in E-mail.*

## BENEFITS

*Employees' last name A-K*  
Gerrienne Keiser • 317-4739  
*Employees' last name L-Z*  
Janet Miller • 317-4730

## PAYROLL

PHONE • 317-4750 FAX • 317-4751

## OMBUDSMAN

Maryann Bulishak • 402-8808

## ORGANIZATIONAL DEVELOPMENT

PHONE • 317-4860 FAX • 317-4861

Diane Carpenter • 317-4862  
Jack Dunleavy • 317-4863  
Linda Durishin • 317-4867  
Kristi Hardner • 317-4864  
Gwen Rosser • 317-4865  
Jody Wannemacher • 317-4866

## HUMAN RESOURCE CONSULTANTS

Chuck Eggen • 317-4729  
Ann Fatzinger • 317-4593  
Joanne Gimpert • 317-4704  
Jeanne Hoover • 317-4702  
Dan Kane • 317-4798  
Carol Mutchler • 402-1208  
Susan Ockovic • 317-4745

## HUMAN RESOURCES

PHONE • 317-4700 FAX • 317-4701



## OASIS— New Outcome Tool to Increase Home Health Accountability

BEGIN WITH THE END IN MIND, SAYS AUTHOR STEPHEN COVEY IN *THE SEVEN HABITS OF HIGHLY SUCCESSFUL PEOPLE*. Determine your goal and focus on that target every day to achieve the outcomes you seek.

This is the basis for outcome-based quality improvement, which has been implemented by LVHHN's Lehigh Valley Home Care. A new federally-mandated program, effective Jan. 1, will test how well Home Care is achieving desired outcomes in patient care.

Called OASIS, which stands for the Outcome and Assessment Information Set (OASIS), this quality measurement tool will introduce a new level of accountability for the home health industry, said Carol Miele, performance improvement manager, Home Care and Hospice. OASIS will demonstrate differences in quality among home health providers.

Today, stakeholders in health care, including patients, payers and regulatory bodies, demand providers validate that the benefits in patient care justify their costs, Miele said.

Obtaining the data required by OASIS, however, will dictate fundamental changes in the process to assess and monitor the patient's home health needs. OASIS requires care providers to collect detailed and extensive information pertaining to the patient's health status at specified intervals while receiving home health services.

During November and December, Home Care's staff completed extensive in-services to learn the new patient documentation requirements resulting from OASIS. Despite the training requirements, however, Miele sees OASIS as very positive.

"We finally have an assessment tool that has been designed specifically for home health," she said. "It will enable us to improve performance and to document and demonstrate our successes for our long-term survival. I see it as a win-win situation for Lehigh Valley Home Care." ■

*by Mary DeHaven*

## THE 6<sup>th</sup> ANNUAL NURSING VOICE

### *Friends of Nursing Essay & Anthology*

*Celebrate 100 years of Nursing at LVHHN's 17th & Chew site by submitting essays, poetry, fiction, photos or drawings for your chance to be published in the commemorative book, "A Centennial of Care: Voices from the Past — Inspiration for the Future." Topics should capture this theme and may include history, tradition, nostalgia, joy, grief, lessons taught, lessons learned, heroes and the next 100 years. All LVHHN employees are encouraged to participate.*

Prizes will be awarded to all published authors, including \$300 to first place, \$200 to second place and \$100 to third. **Entry deadline is Jan. 8, 1999.**

**SEND ENTRIES VIA INTERDEPARTMENTAL MAIL TO: Nursing Voice Editorial Board, C/O Darla Stephens, 2166 S. 12th St.**

**CORRECTION...** An incomplete list of PCC Operations Team members appeared in last month's article on Quality Valley U.S.A winners. The team members are: Lisa Coleman, Jack Dunleavy, George Ellis, Len Farkas, Mary Agnes Fox, Cindy Heidt, Kim Hitchings, Chris Holmes, Cindy Max, Callie McClatchy, Chuck Nace, Nancy O'Connor, Fred Pane, Donna Polaha, Rob Stevens.



## SERVICE ANNIVERSARIES

**Congratulations to the following employees on their December 1998 service anniversaries! Thank you for your continuing service to Lehigh Valley Hospital and Health Network.**

### Twenty-Five Years of Service

Joanmarie S. Boyle  
HBSNF

### Twenty Years of Service

Jean M. Wagner  
Cancer Program  
Helen M. Kressley  
Human Resources Administration

### Fifteen Years of Service

Joseph J. Rycek  
MedEvac

Dorothy A. Gonsalves  
Spectrum Pharmacy CC&I78

Leona J. Onushko  
Office of COO

Madonna A. McCrystal  
Pediatric Unit

Marcia Roman  
Adolescent Psych Unit

### Ten Years of Service

Michele K. Moyer  
Neonatal ICU

Patricia J. Moore  
Pediatric Unit

Ann Marie Green  
Radiology-Diagnostic

Darlene Rompilla  
5C Medical/Surgical Unit

Susan A. Helms  
HBSNF

Dennis G. Cook  
Home Care-Home Health Aide

Alison A. Green  
Radiology-Diagnostic

Linda M. Steely  
Physical Medicine

Kosiwa Lonergan  
Transitional Trauma Unit

Karen L. Nodoline  
Patient Accounting

Rosanne M. Rishko  
Academic Medical Info Services

Lisa R. Hendricks  
Patient Access Services

Carol A. Coppola  
Medical Records

Linda A. Heist  
Ambulatory Surgical Unit - Staging

### Five Years of Service

Madeleine Burger  
Home Care Mublenberg Office

Juanita T. Holben  
Day Care Center

Cathy L. Sander  
Tamaqua HC Skilled Nursing

Christa Texel  
Pocono HC Home Health Aide

Stacy K. Billig  
Tamaqua HC Home Health Aide

Elizabeth A. Pretti  
MHC HC Physical Therapy

Linda L. Fekula  
Radiation Oncology

Janet E. Hart  
Day Care Center

Dennis D. Pfeiffer, Jr.  
HSMP General and Admin.

Vincent R. Lucente, M.D.  
Urogynecology

Joann J. Flexer  
HSMP Allentown Patient Services

If you have news or a story idea for **CheckUp This Month**, send your suggestion by the 20th of the month for publication in the following month to Rob Stevens, editor, public affairs, 1243 SCC-PA, using interoffice mail or e-mail. **CheckUp This Month** is an employee publication of Lehigh Valley Health Network's public affairs department. For additional information, call ext. 3000. Lehigh Valley Health Network is an equal opportunity employer. M/F/D/V

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